2633

Attorney's Docket No.: __42P10984__   <u>Patent</u>

In re the Application of: __Manav Mishra__

                                                                (inventor(s))

Application No.: __09/881,448__

Filed: __June 12, 2001__

For: __ROUTING AND SWITCHING IN A HYBRID NETWORK__

                                        (title)

Mail Stop Amendment
COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, Virginia 22313-1450

SIR: Transmitted herewith is a Response for the above-referenced application.

_____ Applicant claims small entity status. See 37 CFR 1.27.

__XX__   **No additional fee is required.**

The fee has been calculated as shown below:

	(Col. 1) Claims Remaining After Amd.		(Col. 2) Highest No. Previously Paid For	(Col. 3) Present Extra	SMALL ENTITY Rate	SMALL ENTITY Additional Fee	OTHER THAN A SMALL ENTITY Rate	OTHER THAN A SMALL ENTITY Additional Fee
Total Claims	* 22	Minus	** 23	0	X25	$	X50	$ 0
Indep. Claims	* 4	Minus	*** 4	0	X100	$	X200	$ 0
	First Presentation of Multiple Dependent Claim(s)				+180	$	+360	$
					Total Add. Fee	$	Total Add. Fee	$ 0

*   If the entry in Col. 1 is less than the entry In Col. 2,
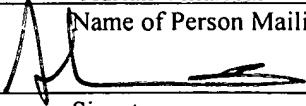   write "0" in Col. 3.

**   If the "Highest No. Previously Paid For" IN THIS
     SPACE is less than 20, write "20" in this space.

*** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this
     space. The "Highest No. Previously Paid For" (Total or Independent) is the highest number
     found from the equivalent box in Col. 1 of a prior amendment or the number of claims
     originally filed.

CERTIFICATE OF MAILING BY FIRST CLASS MAIL (if applicable)

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail
with sufficient postage in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450,
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on _____December 17, 2004_____
                Date of Deposit

_____Adrian Villarreal_____
            Name of Person Mailing Correspondence

_____(signature)_____   December 17, 2004
            Signature   Date

(09/30/03)

_____ A check in the amount of $_____ is attached for presentation of additional claim(s).

_____ Applicant(s) hereby Petition(s) for an Extension of Time of _____ month(s) pursuant to 37 C.F.R. § 1.136(a).

_____ A check for $_____ is attached for processing fees under 37 C.F.R. § 1.17.

_____ Please charge my Deposit Account No. 02-2666 the amount of $_____.

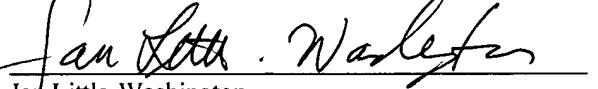_____ **A duplicate copy of this sheet is enclosed.**

__X__ The Under Secretary of Commerce for Intellectual Property and Director of the United States Patent and Trademark Office is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. <u>02-2666</u> **(a duplicate copy of this sheet is enclosed):**

    __X__ Any additional filing fees required under 37 C.F.R. § 1.16 for presentation of extra claims.

    __X__ Any extension or petition fees under 37 C.F.R. § 1.17.

BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP

Date: _Dec. 17, 2004_

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(09/30/03)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
)
    Manav Mishra   )   Examiner: David S. Kim
)
Serial No. 09/881,448   )   Art Unit: 2633
)
Filed: June 12, 2001   )
)
For: ROUTING AND SWITCHING IN A   )
        HYBRID NETWORK   )
)
_____)

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE 37 C.F.R. § 1.111

Sir:

In response to the Office Action mailed September 17, Applicant submits the following Remarks. A Claim Listing begin on page 2 of this paper. Remarks begin on page 8 of this paper. Applicant respectfully requests that the Examiner reconsider the application.

It is not believed that extensions of time are required beyond those that may otherwise be provided for in documents accompanying this paper. However, if additional extensions of time are necessary to prevent abandonment of this application, then such extensions of time are hereby petitioned under 37 C.F.R. §1.136(a). Any fees required therefore are hereby authorized to be charged to Deposit Account No. 02-2666. Please credit any overpayment to the same deposit account.

Kindly enter the following Amendment and consider the following Remarks.